

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of : Customer Number: 80236
 VANDERVEEN, TIMOTHY W. : Confirmation Number: 9236
 Application No.: 10/750,032 : Group Art Unit: 3686
 Filed: December 31, 2003 : Examiner: Rajiv J. Raj
 For: CENTRALIZED MEDICATION MANAGEMENT SYSTEM

Mail Stop AF
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an Amendment in the above-identified application.

Also attached:

The fee has been calculated as shown below:

	NO. OF CLAIMS	HIGHEST PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	Fee
Total Claims	24	26	0	\$52.00 =	\$0.00
Independent Claims	3	3	0	\$220.00 =	\$0.00
Multiple dependent claims newly presented					\$0.00
Fee for extension of time					\$0.00
					\$0.00
Total of Above Calculations					\$0.00

Please charge my Deposit Account No. 502624 in the amount of \$0.00. An additional copy of this transmittal sheet is submitted herewith.

The Commissioner is hereby authorized to charge payment of any fees associated with this communication or credit any overpayment, to Deposit Account No. 502624, including any filing fees under 37 CFR 1.16 for presentation of extra claims and any patent application processing fees under 37 CFR 1.17.

Respectfully submitted,

McDERMOTT WILL & EMERY LLP

/John A. Hankins/

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Please recognize our Customer No. 80236 as our correspondence address.